

RECEIVED
CENTRAL FAX CENTER

JUL 19 2007

ROCKEY, DEPKE, LYONS
& KITZINGER, LLC233 S. WACKER DRIVE, SUITE 5450
CHICAGO, ILLINOIS 60606
PH: (312) 277-2006
FX: (312) 441-0570FACSIMILE TRANSMISSIONTOTAL PAGES (Including Cover Page) 11DATE: 7/19/07Commissioner of Patents and Trademarks
TO: Examiner: Jonathan Crepeau FROM: Robert J. Depke, Reg. No. 37,607FAX NO: (571) 273-8300

MAIN FAX NO.: (312)441-0570

ALTERNATE FAX NO: (312)876-1325

*If you experience any difficulty with this transmission, please call (312) 277-2006 for assistance.*ORIGINAL COPY AND ENCLOSURES WILL BE SENT BY MAIL COURIER
 ✓ WILL NOT BE SENTNOTES:Inventor: Kouji Watanabe et al.
Serial No.: 10/506,621
Art Unit: 1745
Filed: September 3, 2004
Attorney Ref.: 075834.00322CERTIFICATION OF FACSIMILE TRANSMISSIONI hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office to facsimile no. (571) 273-8300 on 7/19/07

Robert J. Depke

IMPORTANT NOTICE

This transmission (including all attached pages) is intended only for the use of the named addressee(s), and may contain information that is privileged or exempt from disclosure under applicable law. **IF YOU ARE NOT A NAMED ADDRESSEE, YOU ARE HEREBY NOTIFIED THAT ANY USE, DISSEMINATION, DISTRIBUTION OR COPYING OF THIS TRANSMISSION IS STRICTLY PROHIBITED.** If you have received this transmission in error, please destroy all copies and notify us immediately at this telephone number: (312) 277-2006.

JUL 19 2007


PTO/SB/21 (09-04)

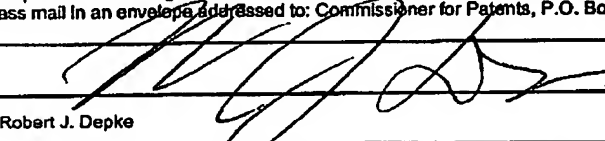
Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/506,621
	Filing Date	Sep 3, 2004
	First Named Inventor	Kouji Watanabe
	Art Unit	1745
	Examiner Name	Jonathan Crepea
Total Number of Pages in This Submission	Attorney Docket Number	075834.00322

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Substitute Specification (26 pgs)
Remarks The Commissioner is hereby authorized to charge any fees due or to credit any overpayment to Deposit Account No. 50-3891.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Rockey, Depke & Lyons, LLC		
Signature			
Printed name	Robert J. Depke		
Date	7/19/07	Reg. No.	37,607

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Robert J. Depke	Date	7/19/07

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.